

Maine Conservation Corps

Trail Training Academy, Field Team Leader, Assistant Team Leader, Field Team Member
and Environmental Educator

- ✓ Read over the entire application before filling it out.
- ✓ Type or print neatly in ink.
- ✓ Print your full name at the bottom of each page.
- ✓ If you need additional space to complete or explain an answer, use a separate sheet of paper.
- ✓ Use the checklist below to ensure that your application packet is complete.

RETURN APPLICATION TO:

Maine Conservation Corps

124 State House Station ♦ Augusta, ME 04333-0124

Please contact the Maine Conservation Corps office if you have any questions

207-624-6085 ♦ 1-800-245-5627 (Maine only) ♦ fax 207-287-3342

email: corps.conservation@maine.gov

Application Checklist (please return the following items in your completed application packet)

- ☐ MCC Application Form
- ☐ Skills and Experience Information & Personal Motivation Statement
- ☐ Two completed Reference Forms – can be submitted directly from your reference
- ☐ Resume & Cover Letter
- ☐ Proof of age & citizenship (copy of birth certificate or current passport; you must be at least 18 & a U.S. citizen)
- ☐ Vehicle Use Agreement
- ☐ Transcripts from all colleges listed in the application – **Not required for Field Team Applicants**

**Applicants selected for our Field Team program will be required
to submit their immunization record and proof of a recent physical.**

APPLICANT PROFILE

1. Indicate the POSITION you are applying for:

- ☐ Trail Training Academy ☐ Field Team Leader ☐ Assistant Team Leader
☐ Field Team Member ☐ Environmental Educator

2. If selected, when is the **earliest** day you could start _____ **Latest** day you could stay _____

3. Name _____ 4. Date of Birth _____
Last First Middle I. Month Day Year

5. Are you a United States citizen, national, or lawful permanent resident alien? ☐ Yes ☐ No

6. Have you ever been enrolled in an AmeriCorps program? ☐ Yes ☐ No

7. **Current Address:** (All information will be sent to this address unless you notify us of a change)

Number and Street City State Zip

Home Phone

☐ Work or ☐ Cell Phone

E-Mail

8. Permanent Address: (where you can always be reached, such as that of a parent or guardian)

Number and Street	City	State	Zip
Home Phone			
<input type="checkbox"/> Work or <input type="checkbox"/> Cell Phone		E-Mail	

9. Phone Number where messages can be left: _____

10. What level of First Aid Training do you have?

☐ None ☐ Community First Aid ☐ Wilderness First Aid ☐ Wilderness First Responder ☐ EMT

11. Education: (check all that apply)

☐ Currently enrolled in high school - graduation date _____ ☐ High School Diploma ☐ GED
☐ Some College ☐ Associates Degree ☐ Bachelor's Degree ☐ Graduate Degree

I certify, under penalty of law, that I have completed high school or its equivalent or will obtain a high school diploma prior to using the AmeriCorps Education Award. _____

Signature is required

12. Beginning with the most recent, list all schools attended: (use additional sheets, if necessary).

A. Name of School _____	Dates Attended _____ to _____
City _____	State _____
Major/Minor _____	Area of Study _____
Type of Degree or Certificate _____	Date Rec'd or Expected _____
B. Name of School _____	Dates Attended _____ to _____
City _____	State _____
Major/Minor _____	Area of Study _____
Type of Degree or Certificate _____	Date Rec'd or Expected _____

LEGAL

Answer all the following questions. Criminal conviction/adjudication may or may not disqualify you.
Do not include minor traffic violations.

13. Have you been: convicted of any criminal offense? a juvenile offender? on probation or parole? currently facing charges for any offenses or are any civil suits or judgments pending against you?

☐ NO ☐ YES Date _____ Place _____ Charge _____ Action Taken _____

14. Are you willing to sign a release so MCC can do a background check on you? ☐ Yes ☐ No

15. I have a valid driver's license in the state of _____ **License #** _____

EMPLOYMENT HISTORY

16. Positions held. Begin with your most recent position.

A. Present/Most Recent Employer _____ From _____ To _____				
Your Title _____		Hours/Week _____	Tel.# _____	
Address _____		_____	_____	_____
Street		City	State	Zip
Responsibilities:				
Reason for Leaving:				

B. Past Employer _____ From _____ To _____				
Your Title _____		Hours/Week _____	Tel.# _____	
Address _____		_____	_____	_____
Street		City	State	Zip
Responsibilities:				
Reason for Leaving:				

REFERENCES

17. Two references are required. Please select people who know you well and are familiar with your background. **You should NOT ask a family member, friend, classmate or co-worker to serve as a reference.** Consider asking supervisors, teachers or someone else familiar with your work experience, academic performance or community involvement. **Please email or mail a copy of the MCC reference form to each of the people you identify.**

A. Name _____ Relationship to You _____ Organization _____

B. Name _____ Relationship to You _____ Organization _____

SKILLS AND EXPERIENCE

On a separate sheet of paper, provide information about the following.

- 18. Describe your past volunteer experience.**
- 19. List your experience level for any outdoor activities you enjoy (such as hiking, backpacking, camping, etc.).**
- 20. List any sports, clubs or civic groups in which you participate.**
- 21. Describe your experience level with trail maintenance, carpentry and stonework.**
- 22. Describe your experience level with teaching and public speaking.**
- 23. List computer, technical programs and software with which you are familiar.**

PERSONAL MOTIVATION STATEMENT

On a separate sheet of paper, answer the following question in essay form.

24. Why do you want to join the Maine Conservation Corps?

CERTIFICATION

Your application must be certified with your original signature in ink. Please read carefully before signing. Unsigned applications and applications with photocopied signatures cannot be considered for admission.

I certify that all of the statements made in this application are true, correct, and complete, to the best of my knowledge, and are made in good faith. I understand that misinformation or omission of information could result in disqualification and/or termination as a Maine Conservation Corps Member. I also understand that the information provided herein may be used to process my application for acceptance into the MCC and for other general routine purposes by the Maine Conservation Corps and it will not be disclosed outside of these entities without prior written permission.

I understand that the Maine Conservation Corps and any of their host Sites will be checking my references to learn about my work history and personal character. I understand these references are confidential. I give my permission for the MCC and any of their host Sites to contact any person or organization that would be useful in assessing my appropriateness for the position.

I further understand that the Maine Conservation Corps will submit my information to the FBI to perform a criminal background check.

Signature

Date

How did you find out about the Maine Conservation Corps program?

- | | | |
|---|---|---|
| <input type="checkbox"/> Former MCC Member | <input type="checkbox"/> Friend/Relative | <input type="checkbox"/> Television Story |
| <input type="checkbox"/> Guidance Counselor | <input type="checkbox"/> Email/Listserve | <input type="checkbox"/> Career Fair |
| <input type="checkbox"/> College/Career Planning Office | <input type="checkbox"/> Internet Website _____ | <input type="checkbox"/> Other _____ |

OPTIONAL INFORMATION – Economically disadvantaged applicants may be able to receive preference for admissions. If you would like to be considered for this preference, please answer the following.

Including yourself, how many people live in your household? _____

What is your total household income from all sources per year? _____

Do you or members of your household receive public assistance such as **TANF or Food Stamps**?

☐ Yes, please specify: _____ ☐ No

Do you have children who rely on you as their primary caretaker or financial support? ☐ Yes ☐ No

TO MAINE CONSERVATION CORPS APPLICANTS
Please review this agreement and provide the required information.

I authorize the Maine Conservation Corps (MCC) and the State of Maine Department of Administrative and Financial Services/Risk Management Division to research my driving record and to contact the Maine motor vehicle registry. I understand this agreement does not guarantee that I will be authorized to operate a State of Maine vehicle.

signature

print name

date

Risk Management Division reserves the right of final approval. The vehicle may NOT be operated by this driver until approved by Risk Management Division.

Number of full years licensed: ☐ 0 to 1 ☐ 1 to 2 ☐ 2 to 3 ☐ 3+

Have you been licensed in any state(s) other than Maine within the past 5 years? ☐ Yes ☐ No

If yes, list state(s) and approximate time period:

State _____	Approx. year(s) _____
State _____	Approx. year(s) _____
State _____	Approx. year(s) _____

Have you been licensed under any other name within the past 5 years? ☐ Yes ☐ No

If yes, list other name: _____ If yes, in what state(s) _____

If you are selected for the MCC Program and your license was issued by **a state other than Maine**, you **may be asked** to submit an **official** Driving Record from each state in which you were licensed within the past 5 years. The Driving Record must be obtained **no more than six months** before the start of your MCC term of service. Upon request, driving records should be submitted to Maine Conservation Corps at 124 State House Station, Augusta, ME 04333-0124.

In addition to violations listed on the next page (if any), please disclose any vehicle accidents you have had within the past five years:

Accident Date	# Vehicles Involved	Town and State	Description of Accident

How long have you been a Maine Conservation Corps participant? ☐ new ☐ 1 term ☐ 2+ terms

MAINE CONSERVATION CORPS VEHICLE USE AGREEMENT

I (*print name*) _____ being age 18 or older, understand and agree that my use of the State of Maine vehicle assigned to me for the dates from ____ / ____ / ____ to ____ / ____ / ____ (maximum one year) shall be exclusively for the fulfillment of the State of Maine business that I have been engaged for. I understand and agree that I am not to use the vehicle for any other reason what so ever (human life threatening medical emergencies excepted). I agree to operate this vehicle in a safe, prudent and lawful manner at all times. Seat belts shall be worn by all vehicle occupants when the vehicle is in motion. I will not permit any other person to operate the vehicle while it is in my control. I will not drive this vehicle out of the State of Maine. I do truthfully state that I have a valid, non-conditional driver's license and that my privilege to drive is not currently under suspension. I grant permission to the State to verify my State of Maine license information and motor vehicle driving record and willingly offer the following license information:

Date of Birth ____ / ____ / ____ License Number _____ State _____

One of the following MUST be checked:

☐ (1) I do truthfully state that in the past five years: my license has NOT been suspended, I have NOT been convicted of any alcohol or drug related driving violations. I have NOT been convicted of any unsafe motor vehicle operations including but not limited to speeding, improper passing, failure to yield right of way, or stop sign violations.

☐ (2) I do truthfully state that in the past five years I HAVE BEEN convicted of the following motor vehicle violations (please list):

Type of violation: _____	Date: ____ / ____ / ____
Type of violation: _____	Date: ____ / ____ / ____
Type of violation: _____	Date: ____ / ____ / ____

IMPORTANT NOTICE TO DRIVER: DO NOT SIGN BELOW UNLESS YOU HAVE READ AND UNDERSTAND THIS DOCUMENT. BY SIGNING YOU AGREE THAT ANY MATERIAL FALSE STATEMENT OR USAGE OF STATE VEHICLES NOT PERMITTED BY THIS AGREEMENT MAY REQUIRE YOU TO ASSUME THE FULL LEGAL AND FINANCIAL CONSEQUENCES OF YOUR ACTIONS.

Driver Signature

Date Signed

↓ *For Maine Conservation Corps Use Only* ↓

Signature and Title of Authorizing State Official

Date Signed

Printed Name of Authorizing Official

Maine Conservation Corps

Printed Department/Bureau Name

Official's Phone #

Official's Fax # **287-3342**

☐ *Pre-approval - no job has been offered at this time*

☐ *Final approval - Job has been offered and accepted as*

☐ *Field Team Leader/Assistant Leader* ☐ *Field Team Member* ☐ *Environmental Educator – Dept:* _____

↓ *For Risk Management Division Use Only* ↓

☐ *Approved* ☐ *Not Approved* ☐ *Pre-Approval Only* ☐ *Approved with this restriction:* _____

Department notified this date By: ☐ *Fax* ☐ *Phone* ☐ *Other* _____

Risk Management Signature: _____ *Date:* ____ / ____ / ____

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